# © 1993-2010 EZ-Filing, Inc. [1-800-998-2424] - Forms Software Only

### Case:11-01066-BKT13 Doc#:1 Filed:02/13/11 Entered:02/13/11 10:29:02 Desc: Main

### Document Page 1 of 43 United States Bankruptcy Court District of Puerto Rico

IN	RE:	Case No
V/	AZQUEZ APONTE, EFRAIN & LOPEZ MARTINEZ, ZULMA R	Chapter 13
	Debtor(s)	
	DISCLOSURE OF COMPENSATION OF ATT	CORNEY FOR DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services re of or in connection with the bankruptcy case is as follows:	
	For legal services, I have agreed to accept	s <u>3,000.00</u>
	Prior to the filing of this statement I have received	\$\$
	Balance Due	\$\$,674.00
2.	The source of the compensation paid to me was: Debtor Other (specify):	
3.	The source of compensation to be paid to me is:  Debtor  Other (specify):	
4.	I have not agreed to share the above-disclosed compensation with any other person unless the	ey are members and associates of my law firm.
	I have agreed to share the above-disclosed compensation with a person or persons who are n together with a list of the names of the people sharing in the compensation, is attached.	ot members or associates of my law firm. A copy of the agreement,
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bar	nkruptcy case, including:
6.	<ul> <li>a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any ac Representation of the debtor in adversary proceedings and other contested bankruptey matter e. [Other provisions as needed]</li> <li>ONLY THE ABOVE CHECKED</li> </ul> By agreement with the debtor(s), the above disclosed fee does not include the following services:	required; ljourned hearings thereof;
	ONLY THE ABOVE CHECKED	

### CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

February 13, 2011

/s/ MIRIAM A. MURPHY LIGHTBOURN

Date

MIRIAM A. MURPHY LIGHTBOURN Miriam A. Murphy Murphy Law Office PO BOX 372519 CAYEY, PR 00737-2519 (787) 263-2377 Fax: (787) 738-4667 mamurphy0@p 1993-2010 EZ-Filing. Inc. [1-800-998-2424] - Forms Software Only

WARNING: Effective December 1, 2009, the 15-day deadline to file schedules and certain other documents under Bankruptcy Rule 1007(c) is shortened to 14 days. For further information, see note at bottom of page 2

### UNITED STATES BANKRUPTCY COURT

### NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a joint case (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

### <u>Chapter 7</u>: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total fee \$299)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your

discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

# <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

### Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

Many filing deadlines change on December 1, 2009. Of special note, 12 rules that set 15 days to act are amended to require action within 14 days, including Rule 1007(c), filing the initial case papers; Rule 3015(b), filing a chapter 13 plan; Rule 8009(a), filing appellate briefs; and Rules 1019, 1020, 2015, 2015.1, 2016, 4001, 4002, 6004, and 6007.

### B201B (Form 201B) 1201066-BKT13 Doc#:1 Filed:02/13/11 Entered:02/13/11 10:29:02 Desc: Main

### Page 4 of 43 Document **United States Bankruptcy Court District of Puerto Rico**

IN RE:	Case No.
VAZQUEZ APONTE, EFRAIN & LOPEZ MARTINEZ, ZULMA R	Chapter 13
Debtor(s)	•

	E TO CONSUMER DEBTOR(S) E BANKRUPTCY CODE	
Certificate of [Non-Attorney]	Bankruptcy Petition Preparer	
I, the [non-attorney] bankruptcy petition preparer signing the debto notice, as required by § 342(b) of the Bankruptcy Code.	r's petition, hereby certify that I delivered to the	debtor the attached
Printed Name and title, if any, of Bankruptcy Petition Preparer Address:	Social Security number petition preparer is not the Social Security num principal, responsible p the bankruptcy petition (Required by 11 U.S.C.	an individual, state aber of the officer, erson, or partner of preparer.)
X		γ 110. <i>)</i>
	of the Debtor	
I (We), the debtor(s), affirm that I (we) have received and read the	attached notice, as required by § 342(b) of the B	ankruptcy Code.
VAZQUEZ APONTE, EFRAIN & LOPEZ MARTINEZ, ZULMA R	X /s/ EFRAIN VAZQUEZ APONTE	2/13/2011
Printed Name(s) of Debtor(s)	Signature of Debtor	Date
Case No. (if known)	X /s/ ZULMA R LOPEZ MARTINEZ	2/13/2011
	Signature of Joint Debtor (if any)	Date

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

# Case:11-01066-BKT13 Doc#:1 Filed:02/13/11 Entered:02/13/11 10:29:02 Desc: Main

Document	Page 5 of 43
<b>B22C</b> (Official Form 22C) (Chapter 13) (12/10)	According to the calculations required by this statement:
	☐ The applicable commitment period is 3 years.
In re: vazquez aponte, efrain & lopez martinez, zulma r	<b>▼</b> The applicable commitment period is 5 years.
Debtor(s)	<b>✓</b> Disposable income is determined under § 1325(b)(3).
Case Number:	$\square$ Disposable income is not determined under § 1325(b)(3).

# CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

(Check the boxes as directed in Lines 17 and 23 of this statement.)

In addition to Schedules I and J, this statement must be completed by every individual Chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

		Part I. REPO	ORT OF INCOME		
	a. [	ital/filing status. Check the box that applies and confidence of the confidence of t	or's Income") for Lines 2-10.		
1	the s mon	igures must reflect average monthly income receive ix calendar months prior to filing the bankruptcy cath before the filing. If the amount of monthly incondivide the six-month total by six, and enter the res	ase, ending on the last day of the ne varied during the six months, you	Column A Debtor's Income	Column B Spouse's Income
2	Gro	ss wages, salary, tips, bonuses, overtime, commis	ssions.	\$ 2,035.58	\$ 1,782.26
3	a and one attac	me from the operation of a business, profession, denter the difference in the appropriate column(s) obusiness, profession or farm, enter aggregate number himent. Do not enter a number less than zero. Do not enter a deduction in Part IV.	of Line 3. If you operate more than ers and provide details on an ot include any part of the business		
	a.	Gross receipts	\$		
	b.	Ordinary and necessary operating expenses	\$		
	c.	Business income	Subtract Line b from Line a	\$	\$
4	diffe	t and other real property income. Subtract Line because in the appropriate column(s) of Line 4. Do no nclude any part of the operating expenses enter IV.	ot enter a number less than zero. <b>Do</b>		
7	a.	Gross receipts	\$		
	b.	Ordinary and necessary operating expenses	\$		
	c.	Rent and other real property income	Subtract Line b from Line a	\$	\$
5	Inte	rest, dividends, and royalties.		\$	\$
6	Pens	ion and retirement income.		\$	\$
7	expe that by th	amounts paid by another person or entity, on a nses of the debtor or the debtor's dependents, in purpose. Do not include alimony or separate main the debtor's spouse. Each regular payment should be nent is listed in Column A, do not report that payment	ncluding child support paid for itenance payments or amounts paid e reported in only one column; if a	\$	\$

- (	-, (- : •	-/							
8	Unemployment compensation. Enter the However, if you contend that unemploy was a benefit under the Social Security Column A or B, but instead state the an	ment compensation receive Act, do not list the amoun	ed by you or	r your spous	se				
	Unemployment compensation claimed to be a benefit under the Social Security Act	Debtor \$	Spouse \$ _			\$		\$	
9	Income from all other sources. Specific sources on a separate page. Total and emaintenance payments paid by your or separate maintenance. Do not included a victim of of international or domestic terrorism.  a.  b.	nter on Line 9. <b>Do not inc</b> <b>spouse, but include all ot</b> ude any benefits received u	lude alimon her paymen ander the Soc	y or separa nts of alimo cial Security or as a victi	my m	\$		\$	
10	<b>Subtotal.</b> Add Lines 2 thru 9 in Colum through 9 in Column B. Enter the total		ompleted, ad	ld Lines 2	4	\$	2,035.58	\$ \$	1,782.26
11	<b>Total.</b> If Column B has been completed and enter the total. If Column B has not Column A.					\$			3,817.84
	Part II. CALCUL	ATION OF § 1325(b)(4	l) COMMI	ITMENT I	PERI	(OD			
12	Enter the amount from Line 11.							\$	3,817.84
13	Marital Adjustment. If you are marrie that calculation of the commitment peri your spouse, enter on Line 13 the amou a regular basis for the household expen basis for excluding this income (such a persons other than the debtor or the depurpose. If necessary, list additional adadjustment do not apply, enter zero.  a.  b. c.	od under § 1325(b)(4) doe int of the income listed in lises of you or your depender is payment of the spouse's otor's dependents) and the	s not require Line 10, Colu ents and spec ax liability of amount of in	e inclusion of umn B that we cify, in the li- or the spous- ncome devot	of the was Nines be's su	incon IOT pelow ppor each	me of paid on v, the t of		
	Total and enter on Line 13.				Ψ			\$	0.00
14	Subtract Line 13 from Line 12 and en	nter the result.						\$	3,817.84
15	Annualized current monthly income 12 and enter the result.	for § 1325(b)(4). Multiply	the amount	from Line	14 by	the n	number	\$	45,814.08
16	<b>Applicable median family income.</b> En household size. (This information is averaged the bankruptcy court.)	•					k of		
	a. Enter debtor's state of residence: Pu	erto Rico	b. Enter o	debtor's hou	isehol	d siz	e: <u>4</u>	\$	27,924.00
17	Application of § 1325(b)(4). Check the  ☐ The amount on Line 15 is less that 3 years" at the top of page 1 of this ☐  ☐ The amount on Line 15 is not less period is 5 years" at the top of page	on the amount on Line 16 s statement and continue we stand the amount on Line	. Check the lith this states e 16. Check	box for "Thement." the box for	"The				•
	Part III. APPLICATION OF					BLE	INCON	1E	

# Case:11-01066-BKT13 Doc#:1 Filed:02/13/11 Entered:02/13/11 10:29:02 Desc: Main Document Page 7 of 43 B22C (Official Form 22C) (Chapter 13) (12/10)

18	Enter the a	mount from Line 11.					\$	3,817.84		
19	total of any expenses of Column B in than the deb necessary, li not apply, en a. b. c.	income listed in Line 10, the debtor or the debtor' ncome (such as payment tor or the debtor's depen st additional adjustments	Column B that vs dependents. Sp of the spouse's tadents) and the ar	vas NO ecify in ax liabi nount o		the household excluding the persons other pose. If	\$	0.00		
20			<b>5(b)(3).</b> Subtract	Line 1	9 from Line 18 and enter the	result.	\$	3,817.84		
21		current monthly incon			ltiply the amount from Line 2		\$	45,814.08		
22	Applicable	median family income.	Enter the amoun	t from l	Line 16.		\$	27,924.00		
23	under §	1325(b)(3)" at the top of	Epage 1 of this st nore than the ar	atemen nount	t and complete the remaining on Line 22. Check the box for "D	parts of this states r "Disposable inco	nent. ome is	s not		
		te Parts IV, V, or VI.			•		ment.	. Do not		
		te Parts IV, V, or VI.  Part IV. CALCULAT	TION OF DED	UCTI	ONS ALLOWED UNDE	R § 707(b)(2)	ment	. Do not		
24A	National St miscellaneo Expenses fo from the cle currently be	Subpart A: Deduct andards: food, apparel us. Enter in Line 24A the r the applicable number of rk of the bankruptcy cour	cions under Stan and services, ho e "Total" amount of persons. (This rt.) The applicable	dards busekee	ONS ALLOWED UNDE	R § 707(b)(2)  vice (IRS)  e, and  llowable Living oj.gov/ust/ or hat would	\$	1,371.00		
24A 24B	National St miscellaneo Expenses fo from the cle currently be dependents v National St Out-of-Pock Out-of-Pock www.usdoj. persons who years of age category tha of any addit persons und- persons 65 a	Subpart A: Deduct  andards: food, apparel  sus. Enter in Line 24A the  r the applicable number of  rk of the bankruptcy cour  allowed as exemptions of  whom you support.  andards: health care. Extended the Care for person  tet Health Care for person  tet Health Care for person  tet Health Care for person  of are under 65 years of ag  or older. (The applicable  t would currently be allo  ional dependents whom y  er 65, and enter the resul	and services, hor e "Total" amount of persons. (This rt.) The applicable on your federal in the first of the bankrupte ge, and enter in Le number of persons of the bankrupte ge, and enter in Le number of persons as exemption you support.) Mut in Line c1. Mule esult in Line c2.	dards  busekee  from I  inform le numb  come t  elow the  s of age  e or old  cy cour  ine b2 to  ons in e  ns on y  ltiply Ltiply L	ONS ALLOWED UNDE of the Internal Revenue Ser eping supplies, personal care RS National Standards for Al ation is available at www.usd per of persons is the number t	R § 707(b)(2)  vice (IRS)  e, and  llowable Living oj.gov/ust/ or hat would any additional  Standards for onal Standards for able at table number of ons who are 65 er in that total amount for total amount for	\$			
	National St miscellaneo Expenses fo from the cle currently be dependents.  National St Out-of-Pock www.usdoj. persons who years of age category tha of any addit persons und- persons 65 a amount, and	Subpart A: Deduct andards: food, apparel bus. Enter in Line 24A the r the applicable number of rk of the bankruptcy cour allowed as exemptions of whom you support.  andards: health care. Enter Health Care for person tet Health Care for person to are under 65 years of ag or older. (The applicable the would currently be allow to and enter the result and older, and enter the re-	and services, hor e "Total" amount of persons. (This rt.) The applicable on your federal in the first of the bankrupte ge, and enter in Le number of persons of the bankrupte ge, and enter in Le number of persons as exemption you support.) Mut in Line c1. Mule esult in Line c2.	dards  ousekee from I inform le numb come te elow the s of age e or old cy cour ine b2 ons in e ons on y ltiply L tiply L Add Lin	of the Internal Revenue Sereping supplies, personal care RS National Standards for Alation is available at <a href="www.usd">www.usd</a> ber of persons is the number of ax return, plus the number of eamount from IRS National and in Line a2 the IRS National and in Line a2 the IRS National and in Line b1 the applicable number of persons is the number of persons in Line b1 the applicable number of persons ach age category is the number our federal income tax return tine a1 by Line b1 to obtain a tine a2 by Line b2 to obtain a sine a2 by Line b2 to obtain a	R § 707(b)(2)  vice (IRS)  e, and  llowable Living oj.gov/ust/ or hat would any additional  Standards for onal Standards for able at cable number of ons who are 65 er in that plus the number total amount for total amount for	\$			
	National St miscellaneo Expenses fo from the cle currently be dependents:  National St Out-of-Pock Out-of-Pock www.usdoj. persons who years of age category tha of any addit persons do a amount, and	Subpart A: Deduct  andards: food, apparel  us. Enter in Line 24A th  r the applicable number of  rk of the bankruptcy cour  allowed as exemptions of  whom you support.  andards: health care. Extended the care of the clerk of the care of the clerk of the care of the clerk of the care of the care of the clerk of the care of	and services, hor e "Total" amount of persons. (This rt.) The applicable on your federal in the first of the bankrupte ge, and enter in Le number of persons of the bankrupte ge, and enter in Le number of persons as exemption you support.) Mut in Line c1. Mule esult in Line c2.	dards  ousekee from I inform le numb come te elow the s of age e or old cy cour ine b2 ons in e ons on y ltiply L tiply L Add Lin	ons allowed under the Internal Revenue Serening supplies, personal care. RS National Standards for Allation is available at <a (this="" 24b.<="" 65="" ago="" amount="" and="" applicable="" as="" bankrupte="" c1.="" c2.="" enter="" esult="" exemption="" federal="" ge,="" href="https://www.usd.ex.com/&lt;/td&gt;&lt;td&gt;R § 707(b)(2)  vice (IRS)  e, and  llowable Living oj.gov/ust/ or hat would any additional  Standards for onal Standards for able at cable number of ons who are 65 er in that plus the number total amount for total amount for&lt;/td&gt;&lt;td&gt;\$&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;/tr&gt;&lt;tr&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;National St&lt;br&gt;miscellaneo&lt;br&gt;Expenses fo&lt;br&gt;from the cle&lt;br&gt;currently be&lt;br&gt;dependents v&lt;br&gt;National St&lt;br&gt;Out-of-Pock&lt;br&gt;Out-of-Pock&lt;br&gt;www.usdoj.&lt;br&gt;persons who&lt;br&gt;years of age&lt;br&gt;category tha&lt;br&gt;of any addit&lt;br&gt;persons und&lt;br&gt;persons 65 a&lt;br&gt;amount, and&lt;br&gt;Persons und&lt;br&gt;a1. Allo&lt;/td&gt;&lt;td&gt;Subpart A: Deduct andards: food, apparel aus. Enter in Line 24A the r the applicable number of the bankruptcy cou- allowed as exemptions of whom you support.  andards: health care. Enter the Health Care for person tet Health Care for per&lt;/td&gt;&lt;td&gt;and services, hore " in="" line="" mule="" mut="" number="" of="" on="" persons="" persons.="" rt.)="" sunder="" support.)="" td="" the="" total"="" years="" you="" your=""><td>dards buseked from I inform le numb come t elow the s of age e or old cy cour ine b2 to ons in e ons on y ltiply L tdAdd Lin</td><td>ons allowed under the Internal Revenue Sereping supplies, personal care RS National Standards for Allation is available at <a href="https://www.usd.eper.of">www.usd.eper.of</a> persons is the number of ax return, plus the number of eamount from IRS National equal in Line a2 the IRS National equal in Line a2 the IRS National equal in Line b1 the applicable number of persons ach age category is the number our federal income tax return line a1 by Line b1 to obtain a line a2 by Line b2 to obtain a line a2 by Line b2 to obtain a line act and c2 to obtain a total ons 65 years of age or older line and c2 to obtain a total obtain a total or other line and c2 to obtain a total obtain a</td><td>R § 707(b)(2)  vice (IRS)  e, and  llowable Living oj.gov/ust/ or hat would any additional  Standards for onal Standards for onal Standards for able at eable number of ons who are 65 er in that plus the number total amount for total amount for health care</td><td>\$</td><td></td></a>	dards buseked from I inform le numb come t elow the s of age e or old cy cour ine b2 to ons in e ons on y ltiply L tdAdd Lin	ons allowed under the Internal Revenue Sereping supplies, personal care RS National Standards for Allation is available at <a href="https://www.usd.eper.of">www.usd.eper.of</a> persons is the number of ax return, plus the number of eamount from IRS National equal in Line a2 the IRS National equal in Line a2 the IRS National equal in Line b1 the applicable number of persons ach age category is the number our federal income tax return line a1 by Line b1 to obtain a line a2 by Line b2 to obtain a line a2 by Line b2 to obtain a line act and c2 to obtain a total ons 65 years of age or older line and c2 to obtain a total obtain a total or other line and c2 to obtain a total obtain a	R § 707(b)(2)  vice (IRS)  e, and  llowable Living oj.gov/ust/ or hat would any additional  Standards for onal Standards for onal Standards for able at eable number of ons who are 65 er in that plus the number total amount for total amount for health care	\$	

# Case:11-01066-BKT13 Doc#:1 Filed:02/13/11 Entered:02/13/11 10:29:02 Desc: Main Document Page 8 of 43 B22C (Official Form 22C) (Chapter 13) (12/10)

	Offici			
25A	and U infor famil	al Standards: housing and utilities; non-mortgage expenses. Enter to Utilities Standards; non-mortgage expenses for the applicable county a mation is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bandly size consists of the number that would currently be allowed as exempter. plus the number of any additional dependents whom you support	and family size. (This kruptcy court). The applicable aptions on your federal income	\$ 442.00
25B	the II infor famil tax re the A	RS Housing and Utilities; mortgage/rent expense. Enter, in RS Housing and Utilities Standards; mortgage/rent expense for your commation is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the band by size consists of the number that would currently be allowed as exempter. Plus the number of any additional dependents whom you support werage Monthly Payments for any debts secured by your home, as stated and enter the result in Line 25B. Do not enter an amount less.	ounty and family size (this kruptcy court) (The applicable aptions on your federal income rt.); enter on Line b the total of ted in Line 47; subtract Line b	
	a.	IRS Housing and Utilities Standards; mortgage/rental expense	\$ 885.00	
	b.	Average Monthly Payment for any debts secured by your home, if any, as stated in Line 47	\$	
	c.	Net mortgage/rental expense	Subtract Line b from Line a	\$ 885.00
26	for y	our contention in the space below:		
	an ex	al Standards: transportation; vehicle operation/public transportation allowance in this category regardless of whether you pay the expense allowance in this category regardless of whether you pay the expense allowance in this category regardless of whether you pay the expense allowance in this category regardless of whether you pay the expense allowance in this category regardless of whether you pay the expense allowance in this category regardless of whether you pay the expense allowance in this category regardless of whether you pay the expense allowance in this category regardless of whether you pay the expense allowance in this category regardless of whether you pay the expense allowance in this category regardless of whether you pay the expense allowance in this category regardless of whether you pay the expense allowance in this category regardless of whether you pay the expense allowance in this category regardless of whether you pay the expense allowance in this category regardless of which represents the payon of the payon regardless of the payon represents the payon represen		\$
	Chec	regardless of whether you use public transportation.		
	expe	ck the number of vehicles for which you pay the operating expenses or nses are included as a contribution to your household expenses in Line	1 0	
27A	_		1 0	
27A	☐ 0  If yo  Tran  Loca  Statis	nses are included as a contribution to your household expenses in Line	e 7.  rom IRS Local Standards: erating Costs" amount from IRS ne applicable Metropolitan	\$ 265.00

Case:11-01066-BKT13 Doc#:1 Filed:02/13/11 Entered:02/13/11 10:29:02 Desc: Main B22C (Official Form 22C) (Chapter 13) (12/10) Page 9 of 43

	OIIICI	ai Form 22C) (Chapter 13) (12/10)		 
	whic	Il Standards: transportation ownership/lease expense; Vehicle 1. (h you claim an ownership/lease expense. (You may not claim an ownetwo vehicles.)		
	<b>v</b> 1	2 or more.		
		r, in Line a below, the "Ownership Costs" for "One Car" from the IRS	Local Standards:	
		sportation (available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the ba		
28		otal of the Average Monthly Payments for any debts secured by Vehic		
	subtr	ract Line b from Line a and enter the result in Line 28. <b>Do not enter a</b>	T	
	a.	IRS Transportation Standards, Ownership Costs	\$ 496.00	
	b.	Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 47	\$	
	c.	Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a	\$ 496.00
	Enter Tran the to	Al Standards: transportation ownership/lease expense; Vehicle 2. Coked the "2 or more" Box in Line 28.  Try, in Line a below, the "Ownership Costs" for "One Car" from the IRS sportation (available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bastal of the Average Monthly Payments for any debts secured by Vehic	Local Standards: ankruptcy court); enter in Line b le 2, as stated in Line 47;	
29		ract Line b from Line a and enter the result in Line 29. <b>Do not enter a</b>	T	
	a.	IRS Transportation Standards, Ownership Costs	\$	
	b.	Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47	\$	
	c.	Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a	\$
30	feder	er Necessary Expenses: taxes. Enter the total average monthly expenseal, state, and local taxes, other than real estate and sales taxes, such as a social-security taxes, and Medicare taxes. Do not include real estate	s income taxes, self-employment	\$ 292.36
31	dedu	er Necessary Expenses: involuntary deductions for employment. Ections that are required for your employment, such as mandatory retire uniform costs. Do not include discretionary amounts, such as voluntary	ement contributions, union dues,	\$ 807.15
32	for te	er Necessary Expenses: life insurance. Enter total average monthly perm life insurance for yourself. Do not include premiums for insurance le life or for any other form of insurance.		\$ 51.54
	Othe	er Necessary Expenses: court-ordered payments. Enter the total mo	onthly amount that you are	
33	requi	ired to pay pursuant to the order of a court or administrative agency, soments. <b>Do not include payments on past due obligations included in</b>	uch as spousal or child support	\$
34	child empl	er Necessary Expenses: education for employment or for a physical. Enter the total average monthly amount that you actually expend for oyment and for education that is required for a physically or mentally in no public education providing similar services is available.	education that is a condition of	\$
35	on cl	er Necessary Expenses: childcare. Enter the total average monthly an nildcare—such as baby-sitting, day care, nursery and preschool. <b>Do not nents.</b>		\$
36	Othe exper	er Necessary Expenses: health care. Enter the total average monthly nd on health care that is required for the health and welfare of yoursel bursed by insurance or paid by a health savings account, and that is in 24B. Do not include payments for health insurance or health savi	f or your dependents, that is not excess of the amount entered in	\$
37	you a servi neces	er Necessary Expenses: telecommunication services. Enter the total actually pay for telecommunication services other than your basic hom ce—such as pagers, call waiting, caller id, special long distance, or in ssary for your health and welfare or that of your dependents. <b>Do not in teted.</b>	ne telephone and cell phone ternet service—to the extent	\$

# Case:11-01066-BKT13 Doc#:1 Filed:02/13/11 Entered:02/13/11 10:29:02 Desc: Main Document Page 10 of 43

38	Official Form 22C) (Chapter 13) (12/10)  Total Expenses Allowed under IRS Standards. En	ter the total of Lines 24	through 37.	\$	4,850.05
50	Subpart B: Additional E			Ψ	
	Note: Do not include any exp				
	Health Insurance, Disability Insurance, and Healt expenses in the categories set out in lines a-c below the spouse, or your dependents.				
	a. Health Insurance	\$	144.00		
	b. Disability Insurance	\$			
39	c. Health Savings Account	\$			
	Total and enter on Line 39	·		\$	144.00
	If you do not actually expend this total amount, stathe space below:	ate your actual total aver	age monthly expenditures in	n	
40	Continued contributions to the care of household of monthly expenses that you will continue to pay for the elderly, chronically ill, or disabled member of your hound to pay for such expenses. Do not include pay	e reasonable and necessousehold or member of	ary care and support of an your immediate family who	is \$	
41	<b>Protection against family violence.</b> Enter the total a you actually incur to maintain the safety of your fami. Services Act or other applicable federal law. The natt confidential by the court.	ly under the Family Vio	ence Prevention and	\$	
42	Home energy costs. Enter the total average monthly Local Standards for Housing and Utilities, that you are provide your case trustee with documentation of y that the additional amount claimed is reasonable as	ctually expend for home our actual expenses, a	energy costs. You must	\$	
43	Education expenses for dependent children under actually incur, not to exceed \$147.92 per child, for at secondary school by your dependent children less tha trustee with documentation of your actual expense is reasonable and necessary and not already account.	tendance at a private or n 18 years of age. <b>You</b> n es, and you must explai	public elementary or nust provide your case n why the amount claimed		
44	Additional food and clothing expense. Enter the tot clothing expenses exceed the combined allowances for National Standards, not to exceed 5% of those combined www.usdoj.gov/ust/ or from the clerk of the bankrupt additional amount claimed is reasonable and necessary.	or food and clothing (append allowances. (This in cy court.) <b>You must de</b>	parel and services) in the IR formation is available at	S \$	
45	<b>Charitable contributions.</b> Enter the amount reasonal charitable contributions in the form of cash or financi in 26 U.S.C. § 170(c)(1)-(2). <b>Do not include any am</b>	al instruments to a chari	table organization as define	d \$	
	income.			Ψ	

Case:11-01066-BKT13 Doc#:1 Filed:02/13/11 Entered:02/13/11 10:29:02 Desc: Main Document Page 11 of 43 B22C (Official Form 22C) (Chapter 13) (12/10)

		<u> </u>	ubpart C	C: Deductions for De	bt Pay	ment			
	you o Payn the to follo	are payments on secured claims own, list the name of the creditor, nent, and check whether the paymotal of all amounts scheduled as caving the filing of the bankruptcy. Enter the total of the Average M	, identify to ment include contractual case, divi	the property securing des taxes or insurance ally due to each Secure ided by 60. If necessa	the deb e. The A red Cred	ot, state the A Average Mor litor in the 6	Average Inthly Pay on this	Monthly ment is	
47	F	Name of Creditor		y Securing the Debt		Average Monthly Payment	include	s payment e taxes or nsurance?	
	a.	COOP A/ C BARRANQUITA	SHARES		\$	433.33	yes	s 🗹 no	
	b.				\$		□yes		
	c.				\$		□yes	s 🗆 no	
				Total: Ad-	d lines	a, b and c.			\$ 433.33
	resid you i credi cure forec	er payments on secured claims. lence, a motor vehicle, or other paymay include in your deduction 1/6 itor in addition to the payments li amount would include any sums closure. List and total any such an rate page.	roperty ne 60th of an isted in Lin in default	ecessary for your supp by amount (the "cure a ne 47, in order to mai that must be paid in o	oort or to amount' intain po order to	he support of ") that you nossession of avoid repos	of your denust pay the proposession of	ependents, the perty. The or	
48		Name of Creditor		Property Securing the	he Debi	t		Oth of the e Amount	
	a.						\$		
	b.						\$		
	c.						\$		
						Total: Ad	ld lines a	a, b and c.	\$ 
49	such	ments on prepetition priority class priority tax, child support and truptcy filing. Do not include cur	l alimony o	claims, for which you	ı were li	iable at the t	time of yo		\$ 20.25
		pter 13 administrative expenses esulting administrative expense.	s. Multiply	y the amount in Line a	a by the	amount in l	Line b, aı	nd enter	
	a.	Projected average monthly Cha	ıpter 13 pl	an payment.	\$				
50	b.	Current multiplier for your distinct schedules issued by the Execution Trustees. (This information is a <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the court.)	ive Office available a	e for United States at the bankruptcy	X				
	c.	Average monthly administrative case	e expense	of Chapter 13	Total: and b	Multiply Lii	nes a		\$
51	Total	l Deductions for Debt Payment. En	iter the tot	tal of Lines 47 throug	h 50.				\$ 453.58
·		S	ubpart D	: Total Deductions f	rom In	come			
52	Tota	al of all deductions from income	Enter th	e total of Lines 38, 46	 6, and 5	1.			\$ 5,447.63

**B22C** (Official Form 22C) (Chapter 13) (12/10)

Date: February 13, 2011

	Tota	l current monthly income. Enter the amount from Line 20.		\$	3,817.8
54	disat	<b>port income.</b> Enter the monthly average of any child support payments, foster care payility payments for a dependent child, reported in Part I, that you received in accordant cable nonbankruptcy law, to the extent reasonably necessary to be expended for such	ce with	\$	
55	from	<b>lified retirement deductions.</b> Enter the monthly total of (a) all amounts withheld by wages as contributions for qualified retirement plans, as specified in § 541(b)(7) and yments of loans from retirement plans, as specified in § 362(b)(19).		\$	
56	Tota	l of all deductions allowed under § 707(b)(2). Enter the amount from Line 52.		\$	5,447.6
	for win lin total	action for special circumstances. If there are special circumstances that justify additional there is no reasonable alternative, describe the special circumstances and the respectance are alternative. If necessary, list additional entries on a separate page. Total the expensional Line 57. You must provide your case trustee with documentation of these expenses idea detailed explanation of the special circumstances that make such expenses necessonable.	ulting expenses es and enter the and you must		
57		Nature of special circumstances	Amount of expense		
	a.		\$		
	b.		\$		
	c.		\$		
		Total: Add I	Lines a, b, and c	\$	
58		l adjustments to determine disposable income. Add the amounts on Lines 54, 55, 5 the result.	6, and 57 and	\$	5,447.6
59	Mon	thly Disposable Income Under § 1325(b)(2). Subtract Line 58 from Line 53 and en	er the result.	\$	-1,629.7
		Part VI. ADDITIONAL EXPENSE CLAIMS			
	and w	<b>r Expenses.</b> List and describe any monthly expenses, not otherwise stated in this form relfare of you and your family and that you contend should be an additional deduction the under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page monthly expense for each item. Total the expenses.	from your curren	t mon	hly
	and w	relfare of you and your family and that you contend should be an additional deduction the under $\S 707(b)(2)(A)(ii)(I)$ . If necessary, list additional sources on a separate page.	from your curren	t mon d refle	hly ct your
60	and w	relfare of you and your family and that you contend should be an additional deduction ne under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page monthly expense for each item. Total the expenses.	from your curren	t mon d refle	hly ct your
60	and wincon avera	relfare of you and your family and that you contend should be an additional deduction ne under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page monthly expense for each item. Total the expenses.	from your currer All figures shoul Monthly A	t mon d refle	hly ct your
60	and wincon avera	relfare of you and your family and that you contend should be an additional deduction ne under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page monthly expense for each item. Total the expenses.	from your currer All figures shoul  Monthly A	t mon d refle	hly ct your
60	and wincom avera  a.  b.	relfare of you and your family and that you contend should be an additional deduction ne under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page monthly expense for each item. Total the expenses.	from your currer All figures shoul  Monthly A  \$ \$ \$	t mon d refle	hly ct your
60	and wincom avera  a.  b.	relfare of you and your family and that you contend should be an additional deduction the under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page ge monthly expense for each item. Total the expenses.  Expense Description	from your currer All figures shoul  Monthly A  \$ \$ \$	t mon d refle	hly ct your
60	and wincom avera  a. b. c.	relfare of you and your family and that you contend should be an additional deduction the under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page ge monthly expense for each item. Total the expenses.  Expense Description  Total: Add Lines a, b and	from your currer All figures shoul  Monthly A  \$  \$  \$  \$  \$  \$  \$	t mont	hly et your

Signature: /s/ ZULMA R LOPEZ MARTINEZ

(Joint Debtor, if any)

© 1993-2010 EZ-Filing, Inc. [1-800-998-2424] - Forms Software Only

Case:11-01066-BKT13 Doc#:1 Filed:02/13/11 Entered:02/13/11 10:29:02 Desc: Main B1 (Official Form 1) (4/10) Document Page 13 of 43

United States Bankruptcy Court District of Puerto Rico				Vol	luntary Petition					
Name of Debtor (if individual, enter Last, First, Mic VAZQUEZ APONTE, EFRAIN	idle):				Name of Joint Debtor (Spouse) (Last, First, Middle):  LOPEZ MARTINEZ, ZULMA R					
All Other Names used by the Debtor in the last 8 ye (include married, maiden, and trade names): <b>EFRAIN VAZQUEZ</b>	ars			(in	All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):  ZULMA LOPEZ  ZULMA RAQUEL LOPEZ MARTINEZ					
Last four digits of Soc. Sec. or Individual-Taxpayer EIN (if more than one, state all): <b>9169</b>	I.D. (ITIN)	No./C	omplete		Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): <b>7271</b>					
Street Address of Debtor (No. & Street, City, State BO QUEBRADILLAS CARR 152 KM 2.3	& Zip Code)	):		ВС	QUEE	ress of Jo BRADILL 2 KM 2.3	.AS	tor (No. & Stree	et, City, St	ate & Zip Code):
BARRANQUITAS, PR	ZIPCODE	∃ 007	94	BA	RRAN	QUITAS	, PR			ZIPCODE 00794
County of Residence or of the Principal Place of Business: <b>Barranquitas</b>					County of Residence or of the Principal Place of Business:  Barranquitas				iness:	
Mailing Address of Debtor (if different from street a P O BOX 630	address)	ziress)		P	Mailing Address of Joint Debtor (if different P O BOX 630				nt from street address):	
BARRANQUITAS, PR	ZIPCODE			— В	BARRANQUITAS, PR		'R		ZIPCODE 00794	
Location of Principal Assets of Business Debtor (if	different from	m stre	et address	above):						
									Γ	ZIPCODE
Type of Debtor (Form of Organization) (Check one box.)  ✓ Individual (includes Joint Debtors) See Exhibit D on page 2 of this form.  ☐ Corporation (includes LLC and LLP)  ☐ Partnership  ☐ Other (If debtor is not one of the above entities, check this box and state type of entity below.)	☐ Sing U.S. ☐ Rail ☐ Stoc ☐ Com ☐ Clea	Nature of Business (Check one box.)  Health Care Business Single Asset Real Estate as defin U.S.C. § 101(51B) Railroad Stockbroker Commodity Broker Clearing Bank Other  Tax-Exempt Entity		efined in	Chapter 9 Recognition of Chapter 11 Main Proceedin Chapter 12 Chapter 15 Pet Recognition of Nonmain Proceedin Nonmain Proceedin Chapter 13 Recognition of Nonmain Proceedin Chapter 13 Recognition of Nonmain Proceeding Check one box.)  Debts are primarily consumer Defents, defined in 11 U.S.C. but		(Check one box.)  apter 15 Petition for cognition of a Foreign in Proceeding apter 15 Petition for cognition of a Foreign in Proceeding for a Foreign in Proceeding for the box.)			
	Title	tor is a	a tax-exen	npt organ ed States	pplicable.)  organization under tates Code (the .  \$ 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."					
Filing Fee (Check one box)			CI I				Chap	oter 11 Debtors	8	
☐ Full Filing Fee attached ☐ Filing Fee to be paid in installments (Applicable only). Must attach signed application for the cour consideration certifying that the debtor is unable except in installments. Rule 1006(b). See Officia	Check if Debto	or is a sm or is not a : or's aggre 52,343,30	is a small business debtor as defined in 11 U.S.C. § 101(51D). is not a small business debtor as defined in 11 U.S.C. § 101(51D). s aggregate noncontingent liquidated debts owed to non-insiders or affiliates are less 343,300 (amount subject to adjustment on 4/01/13 and every three years thereafter).				01(51D).  nsiders or affiliates are less very three years thereafter).			
Filing Fee waiver requested (Applicable to chapte only). Must attach signed application for the cour consideration. See Official Form 3B.		ais	Accep	n is being otances o	g filed w f the pla	ith this p	olicited p	prepetition from	one or mo	ore classes of creditors, in
Statistical/Administrative Information  ✓ Debtor estimates that funds will be available for  ☐ Debtor estimates that, after any exempt property distribution to unsecured creditors.					nses pai	d, there v	vill be n	o funds availab	le for	THIS SPACE IS FOR COURT USE ONLY
Estimated Number of Creditors	00-	5,001 10,00		10,001- 25,000		25,001- 50,000		50,001- 100,000	Over 100,000	
	000,001 to			\$50,000 \$100 mi		\$100,00 to \$500		\$500,000,001 to \$1 billion	More tha	
Estimated Liabilities  So to \$50,001 to \$100,001 to \$500,001 to \$1,000 \$	000,001 to			\$50,000 \$100 mi	*			\$500,000,001 to \$1 billion	More tha	

e Only
Softwar
Forms
-2424] -
866-008
Inc. [1-
-Filing,
010 EZ
1993-2
0

Case:11-01066-BKT13 Doc#:1 Filed:02/13/ B1 (Official Form 1) (4/10) Document	/11 Entered:02/13/11 1	10:29:02 Desc: Main Page 2			
Voluntary Petition (This page must be completed and filed in every case)	Name of Debtor(s): VAZQUEZ APONTE, EFRAIN & I				
Prior Bankruptcy Case Filed Within Last 8	Years (If more than two, attach	additional sheet)			
Location Where Filed: <b>None</b>	Case Number:	Date Filed:			
Location Where Filed:	Case Number:	Date Filed:			
Pending Bankruptcy Case Filed by any Spouse, Partner or	Affiliate of this Debtor (If mo	re than one, attach additional sheet)			
Name of Debtor: None	Case Number:	Date Filed:			
District:	Relationship:	Judge:			
Exhibit A  (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)  Exhibit A is attached and made a part of this petition.	whose debts are primarily consumer debts.)				
	X /s/ MIRIAM A. MURPHY I	LIGHTBOURN 2/13/11  Date			
Does the debtor own or have possession of any property that poses or is a or safety?  Yes, and Exhibit C is attached and made a part of this petition.  No  Exhibit C be completed by every individual debtor. If a joint petition is filed, easy of Exhibit D completed and signed by the debtor is attached and made	bit D ach spouse must complete and attac				
If this is a joint petition:  Exhibit D also completed and signed by the joint debtor is attached.	ed a made a part of this petition.				
Information Regardin (Check any ap  ☐ Debtor has been domiciled or has had a residence, principal place of preceding the date of this petition or for a longer part of such 180 ☐ There is a bankruptcy case concerning debtor's affiliate, general place of better is a debtor in a foreign proceeding and has its principal place or has no principal place of business or assets in the United States in this District, or the interests of the parties will be served in regarding.	pplicable box.) of business, or principal assets in the days than in any other District. partner, or partnership pending in t ace of business or principal assets in but is a defendant in an action or pro-	this District. in the United States in this District, oceeding [in a federal or state court]			
Certification by a Debtor Who Reside		Property			
(Check all app  Landlord has a judgment against the debtor for possession of debtor		omplete the following.)			
(Name of landlord or lesso	or that obtained judgment)				
(Address of lane	dlord or lessor)				
☐ Debtor claims that under applicable nonbankruptcy law, there are the entire monetary default that gave rise to the judgment for poss	session, after the judgment for poss	session was entered, and			
☐ Debtor has included in this petition the deposit with the court of a filing of the petition.	iny rent that would become due du	uring the 30-day period after the			
☐ Debtor certifies that he/she has served the Landlord with this cert	ification. (11 U.S.C. § 362(1)).				

Case:11-01066-BKT13 Doc#:1 Filed:02/13/11 Entered:02/13/11 10:29:02

B1 (Official Form 1) (4/10) Document Page 15 of 43

Page 15 of 43

**Voluntary Petition** 

(This page must be completed and filed in every case)

Name of Debtor(s):

VAZQUEZ APONTE, EFRAIN & LOPEZ MARTINEZ, ZULMA F

### **Signatures**

### Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under Chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United State Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

 $\mathsf{X}$  /s/ EFRAIN VAZQUEZ APONTE

Signature of Debtor

**EFRAIN VAZQUEZ APONTE** 

/s/ ZULMA R LOPEZ MARTINEZ

Signature of Joint Debtor

**ZULMA R LOPEZ MARTINEZ** 

Telephone Number (If not represented by attorney)

February 13, 2011

### Signature of Attorney\*

### $\mathsf{X}$ /s/ $\mathsf{MIRIAM}$ A. $\mathsf{MURPHY}$ LIGHTBOURN

Signature of Attorney for Debtor(s)

**MIRIAM A. MURPHY LIGHTBOURN** Miriam A. Murphy **Murphy Law Office** PO BOX 372519 CAYEY, PR 00737-2519 (787) 263-2377 Fax: (787) 738-4667 mamurphy0@p

### February 13, 2011

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

### Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

Signature o	f Authorized	Individual		
Printed Na	ne of Author	ized Individual		
Title of Au	horized Indi	vidual		

### Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only **one** box.)

- ☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.
- Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

Signature of	Foreign Represer	ntative	
Printed Name	e of Foreign Repr	esentative	

### **Signature of Non-Attorney Petition Preparer**

I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; 2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Address		

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above. Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156.

B1D (Official Form 1, Exhibit D) (12/09)

Case:11-01066-BKT13 Doc#:1 Filed:02/13/11 Entered:02/13/11 10:29:02 Desc: Main

### Page 16 of 43 **United States Bankruptcy Court**

District of Puerto Rico

District of 1 derito	Kico
IN RE:	Case No
VAZQUEZ APONTE, EFRAIN	Chapter <u>13</u>
Debtor(s)	
EXHIBIT D - INDIVIDUAL DEBTOR'S ST CREDIT COUNSELING R	
Warning: You must be able to check truthfully one of the five statement do so, you are not eligible to file a bankruptcy case, and the court can exhatever filing fee you paid, and your creditors will be able to resume and you file another bankruptcy case later, you may be required to patto stop creditors' collection activities.	dismiss any case you do file. If that happens, you will lose collection activities against you. If your case is dismissed
Every individual debtor must file this Exhibit D. If a joint petition is filed, ea one of the five statements below and attach any documents as directed.	ch spouse must complete and file a separate Exhibit D. Check
1. Within the 180 days <b>before the filing of my bankruptcy case</b> , I rece the United States trustee or bankruptcy administrator that outlined the oppperforming a related budget analysis, and I have a certificate from the agence certificate and a copy of any debt repayment plan developed through the account of the control	portunities for available credit counseling and assisted me in y describing the services provided to me. Attach a copy of the
2. Within the 180 days <b>before the filing of my bankruptcy case</b> , I rece the United States trustee or bankruptcy administrator that outlined the opp performing a related budget analysis, but I do not have a certificate from the a copy of a certificate from the agency describing the services provided to y the agency no later than 14 days after your bankruptcy case is filed.	ortunities for available credit counseling and assisted me in agency describing the services provided to me. You must file
3. I certify that I requested credit counseling services from an approved a days from the time I made my request, and the following exigent circum requirement so I can file my bankruptcy case now. [Summarize exigent circum]	nstances merit a temporary waiver of the credit counseling
If your certification is satisfactory to the court, you must still obtain the you file your bankruptcy petition and promptly file a certificate from the of any debt management plan developed through the agency. Failure to case. Any extension of the 30-day deadline can be granted only for cause also be dismissed if the court is not satisfied with your reasons for filing counseling briefing.	e agency that provided the counseling, together with a copy of fulfill these requirements may result in dismissal of your se and is limited to a maximum of 15 days. Your case may
4. I am not required to receive a credit counseling briefing because of: [6] motion for determination by the court.]  Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason for all interest in the court in the cou	n of mental illness or mental deficiency so as to be incapable
of realizing and making rational decisions with respect to financial a Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impair participate in a credit counseling briefing in person, by telephone, o Active military duty in a military combat zone.	red to the extent of being unable, after reasonable effort, to
5. The United States trustee or bankruptcy administrator has determined	that the credit counseling requirement of 11 U.S.C. § 109(h)

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ EFRAIN VAZQUEZ APONTE

Date: February 13, 2011

does not apply in this district.

B1D (Official Form 1, Exhibit D) (12/09)

# Case:11-01066-BKT13 Doc#:1 Filed:02/13/11 Entered:02/13/11 10:29:02 Desc: Main

Document Page 17 of 43 United States Bankruptcy Court **District of Puerto Rico** 

	2 442.00 2.400
IN RE:	Case No
LOPEZ MARTINEZ, ZULMA R  Debtor(s)	Chapter 13
EXHIBIT D - INDIVIDUAL DEBTO	R'S STATEMENT OF COMPLIANCE ING REQUIREMENT
do so, you are not eligible to file a bankruptcy case, and the cou whatever filing fee you paid, and your creditors will be able to	tatements regarding credit counseling listed below. If you cannot art can dismiss any case you do file. If that happens, you will lose resume collection activities against you. If your case is dismissed to pay a second filing fee and you may have to take extra steps
Every individual debtor must file this Exhibit D. If a joint petition is one of the five statements below and attach any documents as direct	filed, each spouse must complete and file a separate Exhibit D. Check cted.
the United States trustee or bankruptcy administrator that outlined	se, I received a briefing from a credit counseling agency approved by the opportunities for available credit counseling and assisted me in the agency describing the services provided to me. Attach a copy of the agh the agency.
the United States trustee or bankruptcy administrator that outlined performing a related budget analysis, but I do not have a certificate	se, I received a briefing from a credit counseling agency approved by the opportunities for available credit counseling and assisted me in from the agency describing the services provided to me. You must file ided to you and a copy of any debt repayment plan developed through d.
	proved agency but was unable to obtain the services during the seven at circumstances merit a temporary waiver of the credit counseling gent circumstances here.]
you file your bankruptcy petition and promptly file a certificate of any debt management plan developed through the agency. Facase. Any extension of the 30-day deadline can be granted only also be dismissed if the court is not satisfied with your reasons counseling briefing.  4. I am not required to receive a credit counseling briefing because	btain the credit counseling briefing within the first 30 days after from the agency that provided the counseling, together with a copy ailure to fulfill these requirements may result in dismissal of your for cause and is limited to a maximum of 15 days. Your case may s for filing your bankruptcy case without first receiving a credit use of: [Check the applicable statement.] [Must be accompanied by a
motion for determination by the court.]  Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by of realizing and making rational decisions with respect to fine	by reason of mental illness or mental deficiency so as to be incapable
	y impaired to the extent of being unable, after reasonable effort, to
5. The United States trustee or bankruptcy administrator has detected a not apply in this district.	ermined that the credit counseling requirement of 11 U.S.C. § 109(h)
I certify under penalty of perjury that the information provide	d above is true and correct.
Signature of Debtor: /s/ ZULMA R LOPEZ MARTINEZ	

Date: **February 13, 2011** 

Case: 11-01066-BKT13 Doc#:1 Filed: 02/13/11 Entered: 02/13/11 10:29:02 Desc: Main

### Document Page 18 of 43 United States Bankruptcy Court District of Puerto Rico

IN RE:	Case No.
VAZQUEZ APONTE, EFRAIN & LOPEZ MARTINEZ, ZULMA R	Chapter 13
Debtor(s)	•

### **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NUMBER OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	\$ 23,392.00		
B - Personal Property	Yes	3	\$ 10,120.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		\$ 26,000.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2		\$ 1,215.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	4		\$ 62,753.00	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			\$ 2,457.42
J - Current Expenditures of Individual Debtor(s)	Yes	1			\$ 2,007.42
	TOTAL	17	\$ 33,512.00	\$ 89,968.00	

## Form 6 - Case: 11-01066-BKT13 Doc#:1 Filed: 02/13/11 Entered: 02/13/11 10:29:02 Desc: Main

### Document Page 19 of 43 United States Bankruptcy Court District of Puerto Rico

IN RE:	Case No.
VAZQUEZ APONTE, EFRAIN & LOPEZ MARTINEZ, ZULMA R	Chapter 13
Debtor(s)	•

### STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ 0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$ 1,215.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ 0.00
Student Loan Obligations (from Schedule F)	\$ 0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ 0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ 0.00
TOTAL	\$ 1,215.00

### **State the following:**

Average Income (from Schedule I, Line 16)	\$ 2,457.42
Average Expenses (from Schedule J, Line 18)	\$ 2,007.42
Current Monthly Income (from Form 22A Line 12; <b>OR</b> , Form 22B Line 11; <b>OR</b> , Form 22C	
Line 20)	\$ 3,817.84

### **State the following:**

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$ 19,580.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ 1,215.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$ 0.00
4. Total from Schedule F		\$ 62,753.00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$ 82,333.00

B6A (Official Form 6A) (12/07)6-BKT13	Doc#:1	Filed:02/1	3/11	Entered:02/13/11 10:29:02	Desc: Main
	Г	Occument	Par	a 20 of 43	

Case No.

(If known)

### **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
HOUSE:CEMENT STRCUTURE WITH 3BR,LR,DR,K 1 BATH ;LOCATED AT BARRANQUITAS PR 00794 DEBTOR HAVE 1/8 OF THE PARTICIPATION WITH 7 BROS TOTAL VALUE \$130,000.00 DEBTOR PARTICIPATION = \$16,250.00 INHERITANCE RIGHT COPETITIONER HAVE 1/14 OF THE PARTICIPATION WITH MOTHER AND 6 BTOS TOTAL VALUE \$100,000.00 DEBTOR PARTICIPATION = \$7,142.00		J	16,250.00 7,142.00	0.00

**TOTAL** 

(Report also on Summary of Schedules)

Debtor(s)

Case No. \_\_\_\_\_(If known)

### **SCHEDULE B - PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1.	Cash on hand.	Х			
2.	Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		SHARES AT COOP BARRANQUITAS #32345 shares at coop barranquitas #9448	J	924.00 5,496.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	Х			
4.	Household goods and furnishings, include audio, video, and computer equipment.		HOUSEHOLD GOODS:TV,RADIO,BEDS,TABLES,CHAIRS,REFRIGERATOR,ST OVE,WASHING MACHINE AND SMALL APPLIANCES	J	3,000.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	Х			
6.	Wearing apparel.		USED CLOTHES	J	500.00
7.	Furs and jewelry.		JEWELRY	J	200.00
8.	Firearms and sports, photographic, and other hobby equipment.	X			
9.	Interest in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	Х			
10.	Annuities. Itemize and name each issue.	X			
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	Х			
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	Х			
14.	Interests in partnerships or joint ventures. Itemize.	Х			

B6B (Official Form 6B) (12/07)6-Cont. T13 Doc#:1 Filed:02/13/11 Entered:02/13/11 10:29:02 Desc: Main Document Page 22 of 43 IN RE VAZQUEZ APONTE, EFRAIN & LOPEZ MARTINEZ, ZULMA R

\_ Case No. \_

Debtor(s)

(If known)

### **SCHEDULE B - PERSONAL PROPERTY** (Continuation Sheet)

	TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
15.	Government and corporate bonds and other negotiable and non-negotiable instruments.	Х			
16.	Accounts receivable.	X			
17.	Alimony, maintenance, support, and property settlements in which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19.	Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22.	Patents, copyrights, and other intellectual property. Give particulars.	X			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.	X			
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
	Inventory.	X			
	Animals.	X			
	Crops - growing or harvested. Give particulars.	X			
	Farming equipment and implements.	X			
34.	Farm supplies, chemicals, and feed.	X			

RGR (Of Case: 11-01066-BKT13	Doc#:1	Filed:02/13	/11	Entered:02/13/11 10:29:02	Desc: Main
bob (Official Form ob) (12/07) - Cont.	Г	Occument	Dag	o 22 of 42	

Debtor(s)

Case No. \_

(If known)

# SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

not already listed. Itemize.				
35. Other personal property of any kind not already listed. Itemize.	O N E		HUSBAND, OR COM	SECURED CLAIM OR EXEMPTION
TYPE OF PROPERTY	N O	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION

B6C (Official Form 6C) (11)66-BKT13	Doc#:1	Filed:02/13/	11	Entered:02/13/11 10:29:02	Desc: Maii
	Г	Occument	Dan	21 of 12	

Case No.

(If known)

### SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor elects the exemptions to which debtor is entitled under:	Check if debtor claims a homestead exemption that exceeds \$146,450. *
(Check one box)	

11 U.S.C. § 522(b)(2) 11 U.S.C. § 522(b)(3)

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTIONS
SCHEDULE A - REAL PROPERTY HOUSE:CEMENT STRCUTURE WITH 3BR,LR,DR,K 1 BATH ;LOCATED AT BARRANQUITAS PR 00794	11 USC § 522(d)(1)	16,250.00	16,250.00
DEBTOR HAVE 1/8 OF THE PARTICIPATION WITH 7 BROS TOTAL VALUE \$130,000.00 DEBTOR PARTICIPATION = \$16,250.00			
INHERITANCE RIGHT COPETITIONER HAVE 1/14 OF THE PARTICIPATION WITH MOTHER AND 6 BTOS	11 USC § 522(d)(1)	7,142.00	7,142.00
TOTAL VALUE \$100,000.00 DEBTOR PARTICIPATION = \$7,142.00 SCHEDULE B - PERSONAL PROPERTY			
HOUSEHOLD GOODS:TV,RADIO,BEDS,TABLES,CHAIRS ,REFRIGERATOR,STOVE,WASHING MACHINE AND SMALL APPLIANCES	11 USC § 522(d)(3)	3,000.00	3,000.00
USED CLOTHES	11 USC § 522(d)(3)	500.00	500.00
JEWELRY	11 USC § 522(d)(4)	200.00	200.00

B6D (Official Form 6D) (12/07)66-BKT13	Doc#:1	Filed:02/13	3/11	Entered:02/13/11 10:29:02	Desc: Main
	Г	Occument	Pan	e 25 of 43	

\_\_\_\_\_ Case No.

Debioi(s)

### (If known)

### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. 9448-14	Х	J	PERSONAL LOAN				26,000.00	19,580.00
COOP A/ C BARRANQUITAS P O BOX 686 BARRANQUITAS, PR 00794			OCT 200					
			VALUE \$ 6,420.00					
ACCOUNT NO.	_		VALUE \$					
			VALUE\$					
ACCOUNT NO.	_		VALUE \$					
<b>0</b> continuation sheets attached			(Total of th		otota		\$ 26,000.00	\$ 19,580.00
			(Use only on la	,	Tota	al	\$ <b>26,000.00</b> (Report also on	

(Report also or Summary of Schedules.) (If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)

B6E (Official Form 6E) (44/6) 6-BKT13	Doc#:1	Filed:02/1	3/11	Entered:02/13/11 10:29:02	Desc: Main
DOE (Official Form OE) (04/10)	Г	Occument	Dac	a 26 of 13	

© 1993-2010 EZ-Filing, Inc. [1-800-998-2424] - Forms Software Only

1 continuation sheets attached

Debtor(s)

Case No. \_\_\_\_\_(If known)

### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Statistical Summary of Certain Liabilities and Related Data. Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data. Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E. TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets) **Domestic Support Obligations** Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1). Extensions of credit in an involuntary case Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3). Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$11,725\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4). Contributions to employee benefit plans Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5). Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$5,775\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6). **Deposits by individuals** Claims of individuals up to \$2,600\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7). **▼** Taxes and Certain Other Debts Owed to Governmental Units Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8). Commitments to Maintain the Capital of an Insured Depository Institution Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9). Claims for Death or Personal Injury While Debtor Was Intoxicated Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol. a drug, or another substance. 11 U.S.C. § 507(a)(10).

\* Amounts are subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

Debtor(s)

\_ Case No. \_

(If known)

### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

### Taxes and Other Certain Debts Owed to Governmental Units

(Type of Priority for Claims Listed on This Sheet)

			(Type of Phorny for Claims Listed on This Sheet						
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. (See Instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
ACCOUNT NO. 9169		J	TAXES	Ħ					
DEPARTMENT OF TREASURY P O BOX 9024140 SAN JUAN, PR 00902							615.00	615.00	
ACCOUNT NO. <b>7271</b>		J	TAXES	Ħ					
DEPARTMENT OF TREASURY P O BOX 9024140 SAN JUAN, PR 00902									
				$\sqcup$			600.00	600.00	
ACCOUNT NO.	_								
ACCOUNT NO.									
ACCOUNT NO.	-								
ACCOUNT NO.									
Sheet no1 of1 continuation sheets Schedule of Creditors Holding Unsecured Priority	att	ached aims	to (Totals of the		ige)	)	\$ 1,215.00	\$ 1,215.00	\$
(Use only on last page of the comp	olete	ed Sch	nedule E. Report also on the Summary of Sch	edul		)	\$ 1,215.00		
(Us report also on the	e or	nly on atistic	last page of the completed Schedule E. If ap al Summary of Certain Liabilities and Relate	plical	ota ble ta.	,		\$ 1,215.00	\$

BGF (On Case: 11-01066-BKT13	Doc#:1	Filed:02/13/2	11 Entered:02/13/11 10:29:02	Desc: Main
Dor (Official Form of) (12/07)	Г	Occument E	22 of 12	

Case No.

(If known)

### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

HUSBAND, WIFE, JOINT, OR COMMUNITY UNLIQUIDATED CONTINGENT CREDITOR'S NAME, MAILING ADDRESS AMOUNT DATE CLAIM WAS INCURRED AND INCLUDING ZIP CODE, AND ACCOUNT NUMBER. CONSIDERATION FOR CLAIM. IF CLAIM IS (See Instructions Above.) SUBJECT TO SETOFF, SO STATE CLAIM PERSONAL LOAN ACCOUNT NO. 9169 **AEELA** P O BOX 363508 SAN JUAN, PR 00936 19,000.00 **CELLULAR SERVICE** ACCOUNT NO. 13397784 AT & T P O BOX 772349 OCALA, FL 34477-2349 314.00 Assignee or other notification for: ACCOUNT NO. AT & T **CINGULAR** P O BOX 192478 SAN JUAN, PR 00936 Assignee or other notification for: ACCOUNT NO. AT & T FIRST REVENUE ASSURANCE P O BOX 8545 **OMAHA, NE 68108** 

3 continuation sheets attached

Subtotal (Total of this page)

19,314.00

Total

(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

\_\_ Case No. \_\_

Debtor(s)

(If known)

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

		('	Continuation Sneet)				
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>523039219739</b>		J	CELLUALR SERVICE				
AT & T P O BOX 772349 OCALA, FL 34477-2349	-						266.00
ACCOUNT NO. 140-001-0065796-0008		w	PERSONAL LOAN				
BANCO POPULAR DE PR BANRUPTCY DEPARTMENT P O BOX 366818 SAN JUAN, PR 00936	-		AUG 2006				5,439.00
ACCOUNT NO. <b>7271</b>		J	POSSIBLE CLAIM				0,100.00
CARIBBEAN AMERICAN LIFE ASSURANCE CO SCOTIABANK PLAZA 273 PONCE DE LEON AVE SUITE 1300 SAN JUAN, PR 00917-1838	-						0.00
ACCOUNT NO. <b>5001470169011</b>		J	PERSONAL LOAN				
CITIFINANCIAL BANCKRUPTCY DEPT P O BOX 71587 SAN JUAN, PR 00936			4/2010				11,203.00
ACCOUNT NO. 5001470164368		J	PERSONAL LOAN				11,203.00
CITIFINANCIAL BANCKRUPTCY DEPT P O BOX 71587 SAN JUAN, PR 00936	-						6,988.00
ACCOUNT NO. <b>692186224</b>		J	SERVICE				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
CLARO P O BOX 70367 SAN JUAN, PR 00936							1,232.00
ACCOUNT NO. <b>32345</b>		w	PERSONAL LOAN	H			-,
COOP A/ C BARRANQUITAS P O BOX 686 BARRANQUITAS, PR 00794	-						4,824.00
Sheet no1 of3 continuation sheets attached to	1	l		Sub	tots		4,024.00
Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of the	is p		)	\$ 29,952.00
			(Use only on last page of the completed Schedule F. Repor the Summary of Schedules, and if applicable, on the S Summary of Certain Liabilities and Relate	als atis	o o tica	n al	\$

\_ Case No. \_

Debtor(s)

(If known)

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

			Continuation Sheet)				
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 8255-90953-2460976		J	SERVICE				
DISH NETWORK DEPT 0063 PALATINE, IL 60055-0063	-						291.00
ACCOUNT NO. <b>00443800019641</b>		J	PERSONAL LOAN				
FIRST BANK PUERTO RICO BANKRUPTCY DEPARTMENT PO BOX 19327 SAN JUAN, PR 00910	-		8/2006				4,466.00
ACCOUNT NO. 395739219		J					,
GC SERVICES LIMITED PARTNERSHIP COLLECTIO AGENCY DIV 6330 GULFTON HOUSTON, TX 77081							1,063.00
ACCOUNT NO. VA0002069981		w	SERVICE				1,000100
HOSPITAL MENONITA DE AIBONITO P O BOX 1379 AIBONITO, PR 00705							66.00
ACCOUNT NO. TRANSWORLD SYSTEMS INC P O BOX 12103			Assignee or other notification for: HOSPITAL MENONITA DE AIBONITO				00.00
TRENTON, NJ 08650							
ACCOUNT NO. <b>8721</b>		J	CREDIT CARD	H			
RADIOSHACK CREDIT PLAN P O BOX 653054 DES MOINES, IA 50364-3054	-						
			ODEDIT OADD				0.00
ACCOUNT NO. 7714-2702-8483-2573	-	J	CREDIT CARD				
SAMS CLUB DISCOVER P O BOX 981401 EL PASO, TX 79998-1401							
							737.00
Sheet no. 2 of 3 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims		•	(Total of the	_	age	e)	\$ 6,623.00
			(Use only on last page of the completed Schedule F. Repor the Summary of Schedules, and if applicable, on the S Summary of Certain Liabilities and Relate	t als tatis	tica	n al	\$

Document Page 31 of 43 IN RE VAZQUEZ APONTE, EFRAIN & LOPEZ MARTINEZ, ZULMA R

Debtor(s)

\_\_\_\_\_ Case No. \_

(If known)

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	
ACCOUNT NO. 7714-1003-5496-1286		J	CREDIT CARD	+				
SAMS CLUB DISCOVER P O BOX 981401 EL PASO, TX 79998-1401							2,278	3.00
ACCOUNT NO.			Assignee or other notification for:	+				
NES NATIONAL ENTERPRISE SYSTEMS 29125 SOLON ROAD SOLON, OH 44139-3442	_		SAMS CLUB DISCOVER					
ACCOUNT NO. <b>6011-3610-6963-2727</b>		J	CREDIT CARD	+				
SAMS CLUB DISCOVER GE MONEY BANK BANRUPTCY DEPT P O BOX 103104 ROSWELL, GA 30076							3,523	3.00
ACCOUNT NO. <b>5049-9401-4748-4082</b>		J	CREDIT CARD	+			5,525	
SEARS P O BOX 6283 SIOUX FALLS, SD 57117							1,063	3.00
ACCOUNT NO.	-						1,000	
ACCOUNT NO.	_							
ACCOUNT NO.								
Sheet no. 3 of 3 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of		ag	e)	\$ 6,864	1.00
			(Use only on last page of the completed Schedule F. Reporthe Summary of Schedules, and if applicable, on the Summary of Certain Liabilities and Relationships and Relationships (Use only on last page of the Complete Summary of Certain Liabilities).	rt als Statis	tic	on al	\$ <b>62,753</b>	3.00

B6G (Official Form 6G) (1207)6-BKT13	Doc#:1	Filed:02/1	3/11	Entered:02/13/11 10:29:02	Desc: Main
D03 (Official 1 01 in 03) (12/07)	Г	Occument	Pan	e 32 of 43	

\_ Case No.

(If known)

### SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

✓ Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE OF OTHER PARTIES TO LEASE OR CONTRACT	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

вен (Official Form он) (12/17)6-ВКТ13	Doc#:1	Filed:02/13	3/11	Entered:02/13/11 10:29:02	Desc: Main
Doll (Official Form off) (12/07)	Г	Occument	Dan	o 22 of 42	

\_\_ Case No.

Debtor(s)

(If known)

### **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
SONIA VAZQUEZ P O BOX 630 BARRANQUITAS, PR 00794	COOP A/ C BARRANQUITAS P O BOX 686 BARRANQUITAS, PR 00794

Debtor(s)

Case No.

DEPENDENTS OF DEBTOR AND SPOUSE

(If known)

### SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on From 22A, 22B, or 22C.

Married		RELATIONSHIP(S): Son Son			AGE(S): 22 YRS 20 YRS
EMPLOYMENT:		DEBTOR		SPOUSE	
Occupation Name of Employer How long employed Address of Employer	JANITOR I DEPARTAME 33 years AVE BARBOS SAN JUAN, P	NTO DE LA FAMILIA EDIFCIO LILA MA D 1: SA 306		S	ES
INCOME: (Estima	te of average or	projected monthly income at time case filed	)	DEBTOR	SPOUSE
<ol> <li>Current monthly</li> <li>Estimated month</li> </ol>		lary, and commissions (prorate if not paid mo	onthly)	\$1,879.00 \$	\$1,782.26 \$
3. SUBTOTAL				\$1,879.00	\$1,782.26
4. LESS PAYROLI a. Payroll taxes ar				\$ 144.02	\$136.34
<ul><li>b. Insurance</li><li>c. Union dues</li></ul>				\$ <b>7.00</b>	\$ <b>187.96</b> \$
d. Other (specify)	See Schedu	le Attached		\$ <b>476.42</b>	\$ <b>352.10</b>
5. SUBTOTAL OF	PAYROLL D	DEDUCTIONS		\$627.44	\$ 676.40
6. TOTAL NET M	ONTHLY TA	KE HOME PAY		\$1,251.56	\$1,105.86
		of business or profession or farm (attach detail	iled statement)	\$	\$
<ol> <li>Income from real</li> <li>Interest and divid</li> </ol>	1 1 2			\$	\$ \$ \$
		ort payments payable to the debtor for the deb	otor's use or	Φ	Φ
that of dependents l 11. Social Security	isted above			\$	\$
(Specify)				\$	\$
12. Pension or retire	ement income			\$	\$
13. Other monthly i				Ψ	. Ψ
(Specify) X Bonu	s			\$100.00	\$
				\$	\$
				<b>&gt;</b>	<b>\$</b>

### 14. SUBTOTAL OF LINES 7 THROUGH 13

**15. AVERAGE MONTHLY INCOME** (Add amounts shown on lines 6 and 14)

\$ 100.00 \$	
\$ 1,351.56 \$	1,105.86

**16. COMBINED AVERAGE MONTHLY INCOME**: (Combine column totals from line 15; if there is only one debtor repeat total reported on line 15)

\$ 2,457.42

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document: **NONE EXPECTED** 

© 1993-2010 EZ-Filing, Inc. [1-800-998-2424] - Forms Software Only

Debtor's Marital Status

# Case:11-01066-BKT13 Doc#:1 Filed:02/13/11 Entered:02/13/11 10:29:02 Desc: Main Document Page 35 of 43 IN RE VAZQUEZ APONTE, EFRAIN & LOPEZ MARTINEZ, ZULMA R Case No.

\_\_\_\_ Case No. \_\_\_\_

Debtor(s)

### ${\bf SCHEDULE~I-CURRENT~INCOME~OF~INDIVIDUAL~DEBTOR(S)}\\$

**Continuation Sheet - Page 1 of 1** 

	DEBTOR	SPOUSE
Other Payroll Deductions:		
REPAYMENT RETIREMENT LOAN	259.50	177.90
UNION FEE	18.80	26.72
SAVINGS AEELA	56.38	
RETIREMENT FUND	141.74	147.48

B6J (Official Form 6J) 01/066-BKT13 Doc#:1 Filed:02/13/11 Entered:02/13/11 10:29:02 Desc: Main Document Page 36 of 43
IN RE VAZQUEZ APONTE, EFRAIN & LOPEZ MARTINEZ, ZULMA R Case No.

Debtor(s)

Nent or home mortgage payment (include lot rented for mobile home)   a. Are real estate taxes included? Yes No Let No Let No Let No	SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR	.(S)	
Rent or home mortgage payment (include lot rented for mobile home)   A 475.00	quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the de	any payment ductions from	ts made biweekly, n income allowed
Rent or home mortgage payment (include lot rented for mobile home)   A 475.00	Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete	a separat	e schedule of
a. Are real estate taxes included? Yes No ✓ b. Is property insurance included? Yes No ✓ 2. Utilities: a. Electricity and heating fuel \$ 109.00 b. Water and sewer \$ 60.00 c. Telephone d. Other CELLULAR \$ 60.00 PROPANE GAS \$ 35.00 3. Home maintenance (repairs and upkeep) \$ 22.00 d. Food \$ 50.00 b. Water and sewer \$ 60.00 C. Telephone \$ 60.00 C. Telephone \$ 70.00 d. Other CELLULAR \$ 60.00 C. Tothing \$ 70.00 d. Other CELLULAR \$ 70.00 d. Other CELULAR \$ 70.00 d. O	expenditures labeled "Spouse."	1	
b. Is property insurance included? Yes No	1. Rent or home mortgage payment (include lot rented for mobile home)	\$	475.00
2. Utilities: a. Electricity and heating fuel \$ 109.00 b. Water and sewer \$ 60.00 c. Telephone \$ 60.00 d. Other CELLULAR \$ 60.00 PROPANE GAS \$ 35.00 3. Home maintenance (repairs and upkeep) \$ 22.00 5. Clothing \$ 500.00 5. Clothing \$ 500.00 5. Clothing \$ 80.00 6. Laundry and dry cleaning \$ 80.00 6. Laundry and dry cleaning \$ 60.00 7. Medical and dental expenses \$ 60.00 8. Transportation (not including car payments) \$ 240.00 8. Transportation (not including car payments) \$ 240.00 11. Insurance (not deducted from wages or included in home mortgage payments) 12. Life c. Health \$ 9.00 d. Auto \$ 9.00 e. Other \$ 9.00 12. Taxes (not deducted from wages or included in home mortgage payments) 13. Installment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan) a. Auto \$ 9.00 b. Other \$ 9.00 13. Home maintenance, and support paid to others \$ 9.00 14. Alimony, maintenance, and support paid to others \$ 9.00 15. Payments for support of additional dependents not living at your home \$ 9.00 16. Regular expenses from operation of business, profession, or farm (attach detailed statement) 17. Other \$ 9.00 BARBER \$			
a. Electricity and heating fuel b. Water and sewer \$ 60.00 b. Water and sewer \$ 60.00 c. Telephone \$ 60.00 p. C. Telephone \$ 50.00 p. Telephone	b. Is property insurance included? Yes No		
b. Water and sewer c. Telephone d. Other CELLULAR S. 60.00 PROPANE GAS S. 35.00 3. Home maintenance (repairs and upkeep) 4. Food S. Clothing S. Clothing S. Clothing S. Medical and dental expenses S. 7. Medical and dental expenses or included in home mortgage payments S. 7. Medical and dental expenses or included in home mortgage payments S. 7. Medical and dental expenses or included in home mortgage payments S. 7. Medical and dental expenses from wages or included in home mortgage payments S. 7. Medical and dental expenses from operation of business, profession, or farm (attach detailed statement) S. 7. Other S. 7. Medical and dental expenses from operation of business, profession, or farm (attach detailed statement) S. 7. Other S. 7. Medical and dependents on thiving at your home S. 7. Medical and dependents on thiving at your home S. 7. Medical and dependents on thiving at your home S. 7. Medical and dependents on thiving at your home S. 7. Medical and dependents on thiving at your home S. 7. Medical and dependents on thiving at your home S. 7. Medical and dependents on thiving at your home S. 7. Medical and dependents on thiving at your home	2. Utilities:		
c. Telephone d. Other CELLULAR	a. Electricity and heating fuel	\$	109.00
d. Other   CELULAR   \$ 60.00   PROPANE GAS   \$ 35.00     3. Home maintenance (repairs and upkeep)   \$ 22.00     4. Food   \$ 500.00     5. Clothing   \$ 500.00     6. Laundry and dry cleaning   \$ 80.00     7. Medical and dental expenses   \$ 60.00     8. Transportation (not including car payments)   \$ 240.00     9. Recreation, clubs and entertainment, newspapers, magazines, etc.   \$ 100.42     10. Charitable contributions   \$ 40.00     11. Insurance (not deducted from wages or included in home mortgage payments)   \$ 100.42     12. Handrowner's or renter's   \$ 100.42     13. Liste   \$ 100.42     14. Auto   \$ 100.00     15. Taxes (not deducted from wages or included in home mortgage payments)   \$ 100.00     15. Installment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan)   \$ 100.00     15. Payments for support of additional dependents not living at your home   \$ 100.00     16. Regular expenses from operation of business, profession, or farm (attach detailed statement)   \$ 100.00     17. Other   LUNCH AT WORK   \$ 176.00     18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.   \$ 2.007.42	b. Water and sewer	\$	60.00
d. Other   CELULAR   \$ 60.00   PROPANE GAS   \$ 35.00     3. Home maintenance (repairs and upkeep)   \$ 22.00     4. Food   \$ 500.00     5. Clothing   \$ 500.00     6. Laundry and dry cleaning   \$ 80.00     7. Medical and dental expenses   \$ 60.00     8. Transportation (not including car payments)   \$ 240.00     9. Recreation, clubs and entertainment, newspapers, magazines, etc.   \$ 100.42     10. Charitable contributions   \$ 40.00     11. Insurance (not deducted from wages or included in home mortgage payments)   \$ 100.42     12. Handrowner's or renter's   \$ 100.42     13. Liste   \$ 100.42     14. Auto   \$ 100.00     15. Taxes (not deducted from wages or included in home mortgage payments)   \$ 100.00     15. Installment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan)   \$ 100.00     15. Payments for support of additional dependents not living at your home   \$ 100.00     16. Regular expenses from operation of business, profession, or farm (attach detailed statement)   \$ 100.00     17. Other   LUNCH AT WORK   \$ 176.00     18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.   \$ 2.007.42	c. Telephone	\$	
ROPANE GAS   \$3.00   \$2.20   \$4. Food   \$500.00   \$500		\$	60.00
4. Food 5. Clothing 6. Laundry and dry cleaning 7. Medical and dental expenses 8. Transportation (not including car payments) 8. Transportation (not including car payments) 9. Recreation, clubs and entertainment, newspapers, magazines, etc. 9. Life contributions 11. Insurance (not deducted from wages or included in home mortgage payments) 12. Health 13. Life contributions 14. Alto contributions 15. Taxes (not deducted from wages or included in home mortgage payments) 15. Taxes (not deducted from wages or included in home mortgage payments) 16. Specify some some some some some some some some		\$	35.00
4. Food 5. Cloudring 6. Laundry and dry cleaning 7. Medical and dental expenses 8. Transportation (not including car payments) 9. Recreation, clubs and entertainment, newspapers, magazines, etc. 9. Charitable contributions 11. Insurance (not deducted from wages or included in home mortgage payments) 12. Handle of the state of th	3. Home maintenance (repairs and upkeep)		22.00
5. Clothing 6. Laundry and dry cleaning 7. Medical and dental expenses 8. \$60.00 8. Transportation (not including car payments) 9. Recreation, clubs and entertainment, newspapers, magazines, etc. 9. \$100.42 10. Charitable contributions 11. Insurance (not deducted from wages or included in home mortgage payments) 11. Insurance (not deducted from wages or included in home mortgage payments) 12. It is constituted in the many spapers of the state		\$	500.00
6. Laundry and dry cleaning 7. Medical and dental expenses 8 60.00 8. Transportation (not including car payments) 9. Recreation, clubs and entertainment, newspapers, magazines, etc. 10. Charitable contributions 11. Insurance (not deducted from wages or included in home mortgage payments) 12. Health 13. Life 14. Life 15. Cypecify 16. Cypecify 17. Taxes (not deducted from wages or included in home mortgage payments) 18. Insulalment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan) 19. Life		\$	80.00
7. Medical and dental expenses 8. Tansportation (not including car payments) 8. Transportation (not including car payments) 9. Recreation, clubs and entertainment, newspapers, magazines, etc. 10. Charitable contributions 11. Insurance (not deducted from wages or included in home mortgage payments) 12. Insurance (not deducted from wages or included in home mortgage payments) 13. Installment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan) 14. Alimony, maintenance, and support paid to others 15. Payments for support of additional dependents not living at your home 16. Regular expenses from operation of business, profession, or farm (attach detailed statement) 17. Other LUNCH AT WORK 18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.  18. 60.00 19. 240.		\$	
8. Transportation (not including car payments) 9. Recreation, clubs and entertainment, newspapers, magazines, etc. 9. Recreation, clubs and entertainment, newspapers, magazines, etc. 9. 10. Charitable contributions 11. Insurance (not deducted from wages or included in home mortgage payments) 12. Insurance (not deducted from wages or included in home mortgage payments) 13. Installment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan) 15. Payments for support of additional dependents not living at your home 16. Regular expenses from operation of business, profession, or farm (attach detailed statement) 17. Other LUNCH AT WORK 18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data. 19. 10. 10. 10. 10. 10. 10. 10. 10. 10. 10		\$	60.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc. 10. Charitable contributions 11. Insurance (not deducted from wages or included in home mortgage payments)  a. Homeowner's or renter's b. Life c. Health d. Auto e. Other Sometiment payments (not deducted from wages or included in home mortgage payments)  12. Taxes (not deducted from wages or included in home mortgage payments)  (Specify) Sometiment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan) a. Auto b. Other Sometiment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan) 13. Installment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan) 14. Alimony, maintenance, and support paid to others 15. Payments for support of additional dependents not living at your home 16. Regular expenses from operation of business, profession, or farm (attach detailed statement)  17. Other LUNCH AT WORK STAGO BABBER BABBER SAGO BEMERGENCY FUND STAGO SAMPAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.		\$	240.00
10. Charitable contributions 11. Insurance (not deducted from wages or included in home mortgage payments)  a. Homeowner's or renter's  b. Life c. Health d. Auto e. Other  12. Taxes (not deducted from wages or included in home mortgage payments)  (Specify)  13. Installment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan) a. Auto b. Other  14. Alimony, maintenance, and support paid to others 15. Payments for support of additional dependents not living at your home 16. Regular expenses from operation of business, profession, or farm (attach detailed statement)  17. Other LUNCH AT WORK  BARBER  EMERGENCY FUND  18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.		\$ —	
11. Insurance (not deducted from wages or included in home mortgage payments) a. Homeowner's or renter's b. Life c. Health d. Auto e. Other \$  12. Taxes (not deducted from wages or included in home mortgage payments) (Specify) \$  13. Installment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan) a. Auto b. Other \$  14. Alimony, maintenance, and support paid to others 15. Payments for support of additional dependents not living at your home 16. Regular expenses from operation of business, profession, or farm (attach detailed statement) 17. Other LUNCH AT WORK BARBER EMERGENCY FUND  18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.			
a. Homeowner's or renter's b. Life c. Health d. Auto e. Other  12. Taxes (not deducted from wages or included in home mortgage payments) (Specify)  \$  13. Installment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan) a. Auto b. Other  \$  14. Alimony, maintenance, and support paid to others 15. Payments for support of additional dependents not living at your home 16. Regular expenses from operation of business, profession, or farm (attach detailed statement) 17. Other  LUNCH AT WORK BARBER BARBER S 30.00 EMERGENCY FUND  \$  2,007.42		Ψ	
b. Life c. Health d. Auto e. Other \$  12. Taxes (not deducted from wages or included in home mortgage payments) (Specify) \$  13. Installment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan) a. Auto b. Other \$  14. Alimony, maintenance, and support paid to others 15. Payments for support of additional dependents not living at your home 16. Regular expenses from operation of business, profession, or farm (attach detailed statement) 17. Other  LUNCH AT WORK BARBER BARBER S 30.00 EMERGENCY FUND  18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.  \$ 2,007.42		\$	
c. Health d. Auto e. Other  \$  12. Taxes (not deducted from wages or included in home mortgage payments) (Specify)  \$  13. Installment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan) a. Auto b. Other  \$  14. Alimony, maintenance, and support paid to others  15. Payments for support of additional dependents not living at your home 16. Regular expenses from operation of business, profession, or farm (attach detailed statement) 17. Other  LUNCH AT WORK BARBER BARBER BARBER SA0.00  18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.  \$  2,007.42			
d. Auto e. Other  \$ 12. Taxes (not deducted from wages or included in home mortgage payments) (Specify)  \$ 13. Installment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan) a. Auto b. Other  \$ 14. Alimony, maintenance, and support paid to others 15. Payments for support of additional dependents not living at your home 16. Regular expenses from operation of business, profession, or farm (attach detailed statement) 17. Other  LUNCH AT WORK BARBER EMERGENCY FUND  18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.  \$ 2,007.42		Φ	
e. Other \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		\$ —	
S   S   S   S   S   S   S   S   S   S		\$ —	
(Specify)	e. outer	— <u>\$</u> —	
(Specify)	12. Taxes (not deducted from wages or included in home mortgage payments)	_ · _	
\$ 13. Installment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan)  a. Auto b. Other \$ \$ 14. Alimony, maintenance, and support paid to others 15. Payments for support of additional dependents not living at your home 16. Regular expenses from operation of business, profession, or farm (attach detailed statement) 17. Other LUNCH AT WORK \$ 176.00  BARBER \$ 30.00  EMERGENCY FUND \$ 20.00  18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.  \$ 2,007.42		\$	
a. Auto b. Other  \$ 14. Alimony, maintenance, and support paid to others 15. Payments for support of additional dependents not living at your home 16. Regular expenses from operation of business, profession, or farm (attach detailed statement) 17. Other  LUNCH AT WORK BARBER BARBER S 30.00 EMERGENCY FUND  18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.  \$ 2,007.42	\ 1 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
b. Other    14. Alimony, maintenance, and support paid to others   \$   \$   \$   \$   \$   \$   \$   \$   \$	13. Installment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan)		
b. Other    S	a. Auto	\$	
15. Payments for support of additional dependents not living at your home 16. Regular expenses from operation of business, profession, or farm (attach detailed statement)  17. Other LUNCH AT WORK  BARBER  \$ 30.00  EMERGENCY FUND  \$ 20.00  18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.  \$ 2,007.42	b. Other	\$	
15. Payments for support of additional dependents not living at your home 16. Regular expenses from operation of business, profession, or farm (attach detailed statement)  17. Other LUNCH AT WORK  BARBER  \$ 30.00  EMERGENCY FUND  \$ 20.00  18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.  \$ 2,007.42		\$	
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)  17. Other  LUNCH AT WORK  BARBER  \$ 30.00  EMERGENCY FUND  \$ 20.00  18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.  \$ 2,007.42	14. Alimony, maintenance, and support paid to others	\$	
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)  17. Other LUNCH AT WORK  BARBER  EMERGENCY FUND  18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.  \$ 2,007.42	15. Payments for support of additional dependents not living at your home	\$	
BARBER EMERGENCY FUND \$ 30.00 \$ 20.00  18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.  \$ 2,007.42	16. Regular expenses from operation of business, profession, or farm (attach detailed statement)		
### 150.00  18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.  \$ 20.00  \$ 20.00	17. Other LUNCH AT WORK	\$	176.00
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.  \$ 2,007.42	BARBER	\$	30.00
applicable, on the Statistical Summary of Certain Liabilities and Related Data.  \$	EMERGENCY FUND	\$	20.00
applicable, on the Statistical Summary of Certain Liabilities and Related Data.  \$			
19. Describe any increase or decrease in expenditures anticipated to occur within the year following the filing of this document:	applicable, on the Statistical Summary of Certain Liabilities and Related Data.	\$	2,007.42
19. Describe any increase or decrease in expenditures anticipated to occur within the year following the filing of this document:			
	19. Describe any increase or decrease in expenditures anticipated to occur within the year following the filing of	of this docu	ment:

NONE EXPECTED

### 20. STATEMENT OF MONTHLY NET INCOME

a. Average monthly income from Line 15 of Schedule I	\$ 2,457	.42
b. Average monthly expenses from Line 18 above	\$	.42
c. Monthly net income (a. minus b.)	\$ 450	.00

B6 Declaration (Official Form 6- Declaration) (D2000#:1 Filed:02/13/11 Entered:02/13/11 10:29:02 Desc: Main IN RE VAZQUEZ APONTE, EFRAIN & LOPEZ MARTINEZ, ZULMA R

© 1993-2010 EZ-Filing, Inc. [1-800-998-2424] - Forms Software Only

Debtor(s)

Case No.

(If known)

(Print or type name of individual signing on behalf of debtor)

### DECLARATION CONCERNING DEBTOR'S SCHEDULES

### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

Date: <b>February 13, 2011</b>	Signature: /s/ EFRAIN VAZQUEZ APONTE	
	EFRAIN VAZQUEZ APONTE	Debtor
Date: <b>February 13, 2011</b>	Signature: /s/ ZULMA R LOPEZ MARTINEZ	(Isia Dalas Kan)
	ZULMA R LOPEZ MARTINEZ	(Joint Debtor, if any,
DECLARATION AND S	SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETIT	ION PREPARER (See 11 U.S.C. § 110)
compensation and have provided the and 342 (b); and, (3) if rules or guident	that: (1) I am a bankruptcy petition preparer as defined in 1 e debtor with a copy of this document and the notices and inforded delines have been promulgated pursuant to 11 U.S.C. § 110(h e given the debtor notice of the maximum amount before preparably that section.	mation required under 11 U.S.C. §§ 110(b), 110(h), setting a maximum fee for services chargeable by
Printed or Typed Name and Title, if any, If the bankruptcy petition preparer responsible person, or partner who	is not an individual, state the name, title (if any), address, a	Social Security No. (Required by 11 U.S.C. § 110.) nd social security number of the officer, principal,
Address		
Signature of Bankruptcy Petition Prepared	r	Date
Names and Social Security numbers is not an individual:	of all other individuals who prepared or assisted in preparing th	is document, unless the bankruptcy petition preparer
If more than one person prepared th	nis document, attach additional signed sheets conforming to th	e appropriate Official Form for each person.
A bankruptcy petition preparer's fair imprisonment or both. 11 U.S.C. §	lure to comply with the provision of title 11 and the Federal R 110; 18 U.S.C. § 156.	ules of Bankruptcy Procedure may result in fines or
DECLARATION UN	NDER PENALTY OF PERJURY ON BEHALF OF COR	RPORATION OR PARTNERSHIP
I, the	(the president or other officer	r or an authorized agent of the corporation or a
	ned as debtor in this case, declare under penalty of perjungular sheets (total shown on summary page plus 1), and the	

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

© 1993-2010 EZ-Filing, Inc. [1-800-998-2424] - Forms Software Only

### B7 (Official Form 1) (0.1066-BKT13 Doc#:1 Filed:02/13/11 Entered:02/13/11 10:29:02 Desc: Main Document Page 38 of 43 United States Bankruptcy Court

**District of Puerto Rico** 

IN RE:	Case No
VAZQUEZ APONTE, EFRAIN & LOPEZ MARTINEZ, ZULMA R	Chapter 13
Debtor(s)	

### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 -25. If the answer to an applicable question is "None," mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. I1 U.S.C. § 101.

### 1. Income from employment or operation of business

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

3.661.00 INCOME FROM EMPLOYMENT YEAR TO DATE \$3.661.00 **INCOME FROM EMPLOYMENT YEAR 2010 \$46,060.00 INCOME FROM EMPLOYMENT YEAR 2009 \$46,060.00** 

### 2. Income other than from employment or operation of business

State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

### 3. Payments to creditors

Complete a. or b., as appropriate, and c.

None	a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other
	debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that
	constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of
	a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit
	counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint
	petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT **AMOUNT PAID** STILL OWING 1,425.00 0.00 Case:11-01066-BKT13 Doc#:1 Filed:02/13/11 Entered:02/13/11 10:29:02 Desc: Main

**BO QUEBRADILLAS CARR 152 KM 2.3** BARRANQUITAS, PR 00794 1/2011

Page 39 of 43

ľ	Vone	
	_	

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,850.\* If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

\* Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.



c. All debtors; List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

### 4. Suits and administrative proceedings, executions, garnishments and attachments

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

### 5. Repossessions, foreclosures and returns

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

### 6. Assignments and receiverships

© 1993-2010 EZ-Filing, Inc. [1-800-998-2424] - Forms Software Only

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and joint petition is not filed.)

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

### 7. Gifts

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

### 8. Losses

None List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

### 9. Payments related to debt counseling or bankruptcy

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under bankruptcy law or preparation of a petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE **MURPHY LAW OFFICE PSC MIRIAM A. MURPHY LIGHTBOURN** PO BOX 372519

DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR 2/2011

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

326.00

Case:11-01066-BKT13 Doc#:1 Filed:02/13/11 Entered:02/13/11 10:29:02 Desc: Mair Document Page 40 of 43

CAYEY, PR 00737

\$326.00 FOR ATORNEY FEE \$274.00 FOR FILING FEE CHAPTER 13 PETITION \$50.00 FOR CREDIT COUNSELING

### 10. Other transfers

None a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

### 11. Closed financial accounts

None List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

### 12. Safe deposit boxes

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

### 13. Setoffs

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

### 14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

### 15. Prior address of debtor

None If debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

**R. LOPEZ MARTINEZ** 

ADDRESS
BO HELECHAL CARR 719 BARRANQUITAS PR
00794

NAME USED
EFRAIN VAZQUEZ APONTE AND ZULMA

DATES OF OCCUPANCY
2001 TO NOV 2009

### 16. Spouses and Former Spouses

None If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

### 17. Environmental Information

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

# Case:11-01066-BKT13 Doc#:1 Filed:02/13/11 Entered:02/13/11 10:29:02 Desc: Mair Document Page 41 of 43

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

None

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

### 18. Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

None

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.



[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date: February 13, 2011 Signature /s/ EFRAIN VAZQUEZ APONTE of Debtor EFRAIN VAZQUEZ APONTE

Date: February 13, 2011 Signature /s/ ZULMA R LOPEZ MARTINEZ
of Joint Debtor ZULMA R LOPEZ MARTINEZ

(if any)

\_\_\_\_\_\_ ocntinuation pages attached

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. § 152 and 3571.

# Case:11-01066-BKT13 Doc#:1 Filed:02/13/11 Entered:02/13/11 10:29:02 Desc: Main Document Page 42 of 43 United States Bankruptcy Court District of Puerto Rico

IN RE:		Case No
VAZQUEZ APONTE, EFRAIN & LOPE	Z MARTINEZ, ZULMA R  Debtor(s)	_ Chapter <b>13</b>
	VERIFICATION OF CREDITOR MATR	PIX
The above named debtor(s) hereby ve	rify(ies) that the attached matrix listing creditor	rs is true to the best of my(our) knowledge.
Date: February 13, 2011	Signature: /s/ EFRAIN VAZQUEZ APONTE	
- <del></del>	EFRAIN VAZQUEZ APONTE	Debtor
D	Q:	
Date: <b>February 13, 2011</b>	Signature: /s/ ZULMA R LOPEZ MARTINEZ ZULMA R LOPEZ MARTINEZ	Laint Dahton if any
	ZULIVIA N LUPEZ IVIANTINEZ	Joint Debtor, if any

### Case:11-01066-BKT13 Doc#:1 Filed:02/13/11 Entered:02/13/11 10:29:02 Desc: Main

**VAZQUEZ APONTE, EFRAIN POBOX630** BARRANQUITAS, PR 00794

Document Page 43 of 43 COOP A/C BARRANQUITAS P O BOX 686 BARRANQUITAS, PR 00794

**GE MONEY BANK BANRUPTCY DEPT** P O BOX 103104 ROSWELL, GA 30076

LOPEZ MARTINEZ, ZULMA R **POBOX630** BARRANQUITAS, PR 00794

DEPARTMENT OF TREASURY P O BOX 9024140 SAN JUAN, PR 00902

**SEARS** P O BOX 6283 SIOUX FALLS, SD 57117

SAMS CLUB DISCOVER

Miriam A. Murphy **Murphy Law Office** PO BOX 372519 CAYEY, PR 00737-2519 **DISH NETWORK DEPT 0063 PALATINE, IL 60055-0063** 

**SONIA VAZQUEZ** P O BOX 630 BARRANQUITAS, PR 00794

**AEELA** P O BOX 363508 SAN JUAN, PR 00936 **FIRST BANK PUERTO RICO BANKRUPTCY DEPARTMENT** PO BOX 19327 SAN JUAN, PR 00910

TRANSWORLD SYSTEMS INC P O BOX 12103 TRENTON, NJ 08650

AT & T P O BOX 772349 OCALA, FL 34477-2349 FIRST REVENUE ASSURANCE P O BOX 8545 **OMAHA, NE 68108** 

**BANCO POPULAR DE PR BANRUPTCY DEPARTMENT** P O BOX 366818

SAN JUAN, PR 00936

**GC SERVICES LIMITED PARTNERSHIP COLLECTIO AGENCY DIV** 6330 GULFTON HOUSTON, TX 77081

CO SCOTIABANK PLAZA **273 PONCE DE LEON AVE SUITE 1300** SAN JUAN, PR 00917-1838

CARIBBEAN AMERICAN LIFE ASSURANCE HOSPITAL MENONITA DE AIBONITO P O BOX 1379 AIBONITO, PR 00705

**CINGULAR** P O BOX 192478 SAN JUAN, PR 00936 **NES NATIONAL ENTERPRISE SYSTEMS** 29125 SOLON ROAD SOLON, OH 44139-3442

**CITIFINANCIAL BANCKRUPTCY DEPT** P O BOX 71587 SAN JUAN, PR 00936

RADIOSHACK CREDIT PLAN P O BOX 653054 **DES MOINES, IA 50364-3054** 

**CLARO** P O BOX 70367 SAN JUAN, PR 00936 SAMS CLUB DISCOVER P O BOX 981401 EL PASO, TX 79998-1401